

CLAIMS ONLY							Application Number <div style="font-size: 1.2em; font-family: cursive;">10 790685</div>		Filing Date		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1							51				
2							52				
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49							99				
50							100				
Total Indep	4						Total Indep				
Total Depend	6										

10790685

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	4					
Total Depend	6					
Total Claims	10					

May be used for additional claims or amendments						
	Independence		Dependence		Independence	
	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep						
Total Depend						
Total Claims						